PROJECT 10073 RECORD

Aug 65 1700Z	2. LOCATION Hamilton, Ohio			
3. SOURCE Civilian	10. CONCLUSION Insufficient Data for evaluati	Lon		
4. NUMBER OF OBJECTS One				
5. LENGTH OF OBSERVATION 30 minutes	11. BRIEF SUMMARY AND ANALYSIS Without an exact date of the s	sighting an e	valuat	ion is not
6. TYPE OF OBSERVATION Ground Visual	possible.	Director Aerospo ATTIN: A Maxwell		- 7
7. COURSE In the NW		ali AFB	RETURN	多年
8. PHOTOS Q Yes Q No		ndies Inst es Branch Alabama	EN TO:	20010
9. PHYSICAL EVIDENCE				6 1

FTD SEP 63 0-329 (TDE) Previous editions of this form may be used.

8. IF you saw the object at NIGHT, what did	you notice concerning the STARS and MOON?
8.1 STARS (Circle One):	8.2 MOON (Circle One):
a. None b. A few c. Many d. Don't remember	a. Bright moonlight b. Dull moonlight c. No moonlight — pitch dark d. Don't remember
9. What were the weather conditions at the tir	ne you saw the object?
CLOUDS (Circle One):	WEATHER (Circle One):
a. Clear sky	Dry
b. Hazy	b. Fog, mist, or light rain
c. Scattered clouds	c. Moderate or heavy rain
d. Thick or heavy clouds	d. Snow
	e. Don't remember
10. The object appeared: (Circle One):	
a. Solid d. As a li	ht
b. Transparent e. Don't re	
c. Vapor	
b. Dimmer d	About the same Don't know
12. The edges of the object were:	
(Circle One): a. Fuzzy or blurred	e. Other
b. Like a bright star	
c. Sharply outlined	
d. Don't remember	
13. Did the object:	(Circle One for each question)
a. Appear to stand still at any time?	Yes No Don't know
b. Suddenly speed up and rush away at	
c. Break up into parts or explode?	Yes No Don't know
d. Give off smoke?	Yes No Don't know.
e. Change brightness?	Yes No Don't know
f. Change shape?	Yes No Don't know
g. Flash or flicker?	Yes No Don't know
h. Disappear and reappear?	Yes No Don't know

HAMILTON, Ohio August 1965

U.S. AIR FORCE TECHNICAL INFORMATION

This questionnaire has been prepared so that you can give the U.S. Air Force as much information as possible concerning the unidentified aerial phenomenon that you have observed. Please try to answer as many questions as you possibly can. The information that you give will be used for research purposes. Your name will not be used in connection with any statements, conclusions, or publications without your permission. We request this personal information so that if it is deemed necessary, we may contact you for further details.

1. When did you see the object?	2. Time of day:
Day Month Year	(Circle One): A.M. or P.M.
3. Time Zone: (Circle One): a. Eastern b. Central c. Mountain d. Pacific e. Other	(Circle One): a. Daylight Saving b. Standard
4. Where were you when you saw the object?	
Negrest Postal Address	City or Town State or County
5. How long was object in sight? (Total Duration)	Hours Minutes Seconds
a. Certain	c. Not very sure
	d. Just a guess
5.1 How was time in sight determined?	time of T.V. hours
	No
6. What was the condition of the sky?	
DAY	NIGHT
	a. Bright >
b. Cloudy	b. Cloudy
7. IF you saw the object during DAYLIGHT, where w	vas the SUN located as you looked at the object?
(Circle One): a. In front of you	d. To your left
b. In back of you	e. Overhead
c. To your right	f. Don't remember

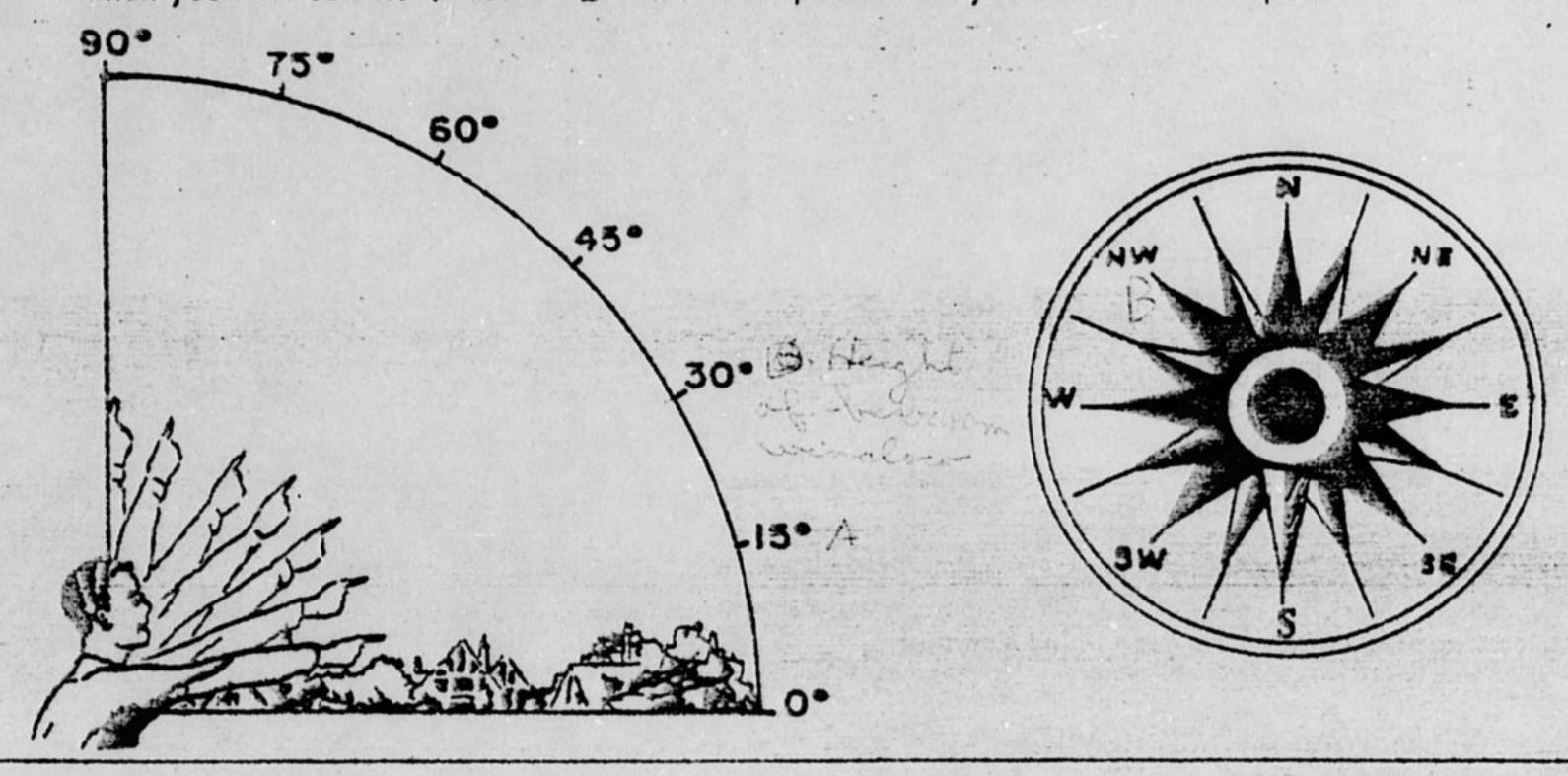
FTD OCT 62 164

Musical rate

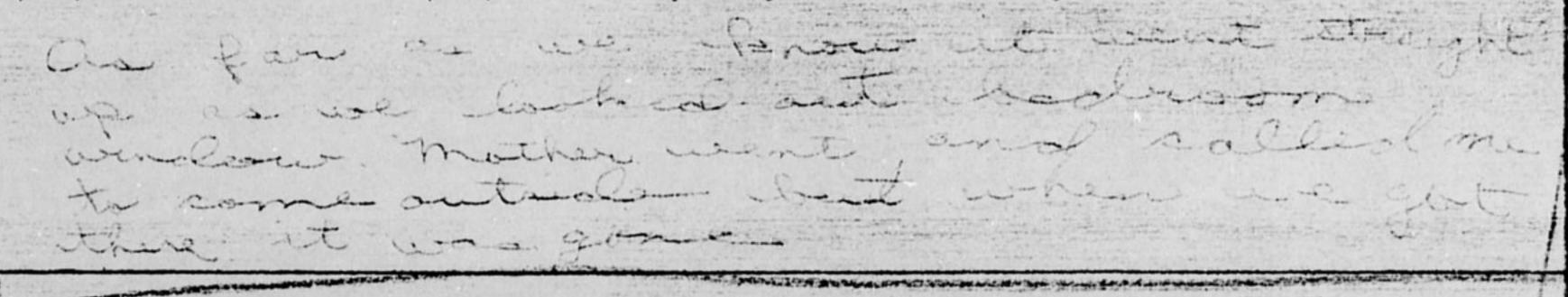
14.	Did the object disappear while you were watching it? If so, how?
	and the content with the content of the the
15,	Did the object move behind something at any time, particularly a cloud?
	(Circle One): Yes No Don't Know. IF you answered YES, then tell what it moved behind:
16.	Did the object move in front of something at any time, particularly a cloud?
	(Circle One): Yes No Don't Know. IF you answered YES, then tell what in front of:
	In front of:
17.	Tell in a few words the following things about the object: a. Sound Andrew And
18.	We wish to know the angular size. Hold a match stick at arm's length in line with a known object and note how much of the object is covered by the head of the match. If you had performed this experiment at the time of the sighting, how much of the object would have been covered by the match head?
(?) at muit 5 foot duameter or Aggir.
19.	Draw a picture that will show the shape of the object or objects. Label and include in your sketch any details of the object that you saw such as wings, protrusions, etc., and especially exhaust trails or vapor trails. Place an arrow beside the drawing to show the direction the object was moving.

20. Do you think you can estimate the speed of the object (Circle One) Yes No IF you answered YES, then what speed would you est	
21. Do you think you can estimate how far away from you (Circle One) Yes No IF you answered YES, then how far away would you s	
22. Where were you located when you saw the object? (Circle One): a. Inside a building b. In a car c. Outdoors d. In an airplane (type) e. At sea f. Other	a. In the business section of a city? b. In the residential section of a city? c. In open countryside? d. Near an airfield? e. Flying over a city? f. Flying over open country? g. Other
24. IF you were MOYING IN AN AUTOMOBILE or other v 24.1 What direction were you moving? (Circle One)	ehicle at the time, then complete the following questions:
a. North b. Northeast d. Southeast 24.2 How fast were you moving?	
25. Did you observe the object through any of the followi	ng?
b. Sun glasses Yes No f c. Windshield Yes No g	Binoculars Yes No Telescope Yes No Theodolite Yes No Other
	ble of what you saw, describe in your own words a common vould give the same appearance as the object which you saw.

27. In the following sketch, imagine that you are at the point shown. Place an "A" on the curved line to show how high the object was above the horizon (skyline) when you first saw it. Place a "B" on the same curved line to show how high the object was above the horizon (skyline) when you last saw it. Place an "A" on the compass when you first saw it. Place a "B" on the compass where you last saw the object.



28. Draw a picture that will show the motion that the object or objects made. Place an "A" at the beginning of the path, a "B" at the end of the path, and show any changes in direction during the course.



30. Have you ever seen this, or a similar object before.	If so give date or dates and la	ocation.
31. Was anyone else with you at the time you saw the obj	ect? (Circle One) Yes	No
31.1 IF you answered YES, did they see the object t	oo? (Circle One) Yes	No
31.2 Please list their names and addresses:		
Hamilton / Ehro		
32. Please give the following information about yourself:		
NAME		
Last Name	First Name	Middle Name
ADDRESS	City Z	one State
TELEPHONE NUMBER		
Indicate any additional information about yourself, in	A A A A A A A A A A A A A A A A A A A	
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henced it agreement	zere-e-le-	
33. When and to whom did you report that you had seen th	ne object?	
Day Month Year		
Mainti (agr		

i scalilla					Page 7
4.	Date you completed this questionnaire:	4	Chamile	1966	
		Day	Honth	Year	
•	Information which you feel pertinent and questionnaire or a narrative explanation		vered in the spec	ific points of the	

FTD (TDEW) Wright-Patterson AFB, Ohio -45433 5 April 1966

Hamilton, Ohio

Dear Miss

Reference your unidentified observation in the summer of 1965. The information contained in your letter is not sufficient for evaluation. Request you commete the attached FTD Form 164 and return it in the envelope provided.

We wish to thank you for reporting your observation to the Air Force.

Sincerely,

Will Behin KHECTOR QUINTANILLA, Jr, Major, USAF Chief, Project Blue Book